## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

1809

| CLAIMS AS FILED - PART I (Column 1) (Column 2)           |  |   |                  |              |                                       |                  |            | SMALL ENTITY TYPE OF                   |                        |          | OTHER THAN R SMALL ENTITY             |                        |  |
|--|--|---|------------------|--------------|---------------------------------------|------------------|------------|--|------------------------|----------|---------------------------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 22               |              |                                       |                  |            | RATE                                   | FEE                    |          | RATE                                  | FEE                    |  |
| FO   | R  |   | NUMBER FILED     |              | NUMBER EXTRA                          |                  | 84         | ASIC FEE                               | 355.00                 | OR       | BASIC FEE                             | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS                                  |  |   | 22 minus 20=     |              | . 2                                   |                  |            | X\$ 9=                                 |                        | OR       | X\$18=                                | 36.                    |  |
| INDEPENDENT CLAIMS                                       |  |   |                  | nus 3 =      |                                       |                  |            | X40=                                   |                        | OR       | X80=                                  | 80                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |  |   |                  |              | · · · · · · · · · · · · · · · · · · · |                  |            | +135=                                  | :                      | OR       | +270=                                 |                        |  |
| * If the difference in column 1 is less than zero, enter |  |   |                  |              | r "0" in c                            | olumn 2          | <u> </u>   | TOTAL                                  |                        | OR       | TOTAL                                 | 826                    |  |
| CLAIMS AS AMENDED - PART II                              |  |   |                  |              |                                       |                  | -          | \aee: -                                | ·                      |          | OTHER                                 |                        |  |
| _  |  | (Column 1)                                |                  | (Colui       |                                       | (Column 3)       | S<br>      | SMALL E                                |                        | OR       | SMALL E                               |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI | IBER                                  | PRESENT<br>EXTRA |            | RATE                                   | ADDI-<br>TIONAL<br>FEE |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus            | **           |                                       | =                |            | X\$ 9=                                 |                        | OR       | X\$18=                                |                        |  |
|  | Independent  | NITATION OF "                             | Minus            | ***          | T C1 4114                             | =                |            | X40=                                   |                        | OR       | X80=                                  |                        |  |
|  | FIRST PRESE  | NTATION OF M                              | ULTIPLE DE       | CNUEN        | LAIM                                  |                  |            | +135=                                  |                        | OR       | +270=                                 |                        |  |
| •  |  |   |                  |              |                                       |                  |            | TOTAL                                  |                        |          | TOTAL                                 |                        |  |
|  |  | (Caluma C)                                | AD               | DIT. FEE     |                                       | l ~' '           | ADDIT. FEE |  |                        |          |                                       |                        |  |
|  |  | (Column 1)<br>CLAIMS                      | •                |              | mn 2)<br>HEST                         | (Column 3)       |            | ······································ | VDD:                   | <b> </b> | · · · · · · · · · · · · · · · · · · · | VDD:                   |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                  | NUM<br>PREVI | MBER<br>OUSLY<br>FOR                  | PRESENT<br>EXTRA |            | RATE                                   | ADDI-<br>TIONAL<br>FEE |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  |   | Minus            | **           |                                       | =                |            | X\$ 9=                                 |                        | OR       | X\$18=                                |                        |  |
|  | Independent  | •   | Minus            | ***          |                                       | ]=               |            | X40=                                   |                        | OR       | X80=                                  |                        |  |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                  |              |                                       |                  |            | 405                                    |                        |          | ^                                     | 1                      |  |
|  |  |   |                  |              |                                       |                  |            | +135=                                  |                        | OR       | +270=                                 |                        |  |
|  |  |   |                  |              |                                       |                  |            | TOTAL<br>DIT. FEE                      |                        | OR       | TOTAL<br>ADDIT. FEE                   |                        |  |
|  |  | (Column 1)                                | -                |              | ımn 2)                                | (Column 3)       |            |  |                        |          |                                       |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI | HEST<br>MBER<br>IOUSLY<br>) FOR       | PRESENT<br>EXTRA |            | RATE                                   | ADDI-<br>TIONAL<br>FEE |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus            | ••           |                                       | =                |            | X\$ 9=                                 |                        | OR       | X\$18=                                |                        |  |
|  | Independent  |   | Minus            | ***          | T 61 :                                | =                |            | X40=                                   |                        | OR       | X80=                                  |                        |  |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPE  |   |                  |              | I CLAIN                               |                  |            |  |                        |          |                                       | <del> </del>           |  |
|  | If the entry in colu   | mn 1 is less than t                       | he entry in col- | ımn 2. writ  | le "0" in co                          | olumn 3.         | L          | +135=                                  |                        | OR       | +270=                                 |                        |  |
| ••   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                  |              |                                       |                  |            |  |                        |          |                                       |                        |  |